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CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN	
. CLAIMS							RATE		EE	7	RATE	FEE
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NDENT C	LAIMS	minus 3 =					X43=			OR	X86=	
LE DEPENDENT CLAIM PRESENT						+145=			OR	+290=		
tifference in column 1 is less than zero, enter "0" in column 2						TOTAL	ऱ—		OR	TOTAL		
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try in column 1 is less than the entry in column 2, write "0" in column 3.							+145= TOTAL	_		OR	+290= TOTAL	
tighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
	ber Previously Paid					r foun	d in the a	ppropri	kod ess	in col	ırın 1.	

ATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number